

February 27, 2015
Appropriations Committee of the Connecticut General Assembly

Testimony of Planned Parenthood of Southern New England by
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on H.B. No. 6824 AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET
RECOMMENDATIONS FOR HUMAN SERVICES PROGRAMS

As the state's largest provider of family planning and reproductive health care, Planned Parenthood of Southern New England is compelled to testify, with great concern, about a number of the cuts proposed to the State Medicaid program as they will likely impact our state's low income women of reproductive age and their families, many of them being our patients.

- The cut to *HUSKY A* eligibility for adults, including pregnant women, with income above 138% of the federal poverty level, is just plain indefensible. Pregnancy is not a “qualifying event” for off-cycle enrollment in a qualified health plan, assuming women at that income level, even with federal subsidy, have the resources to enroll. We all know how this story will end: women will forego necessary prenatal care, but at the appointed time, will need to present themselves at emergency rooms for labor and delivery, at both great expense and unnecessary personal health risk.
- Likewise, eliminating *Healthy Start*, a longstanding program that gets low income pregnant women quickly and efficiently covered in order to jump-start prenatal care, will only, ultimately, cost, not save, state dollars, and contribute to the unacceptable infant mortality rates we've managed to improve in the past twenty years.
- For other parents forced from *HUSKY*, experts estimate based on experiences in nearby states, like Rhode Island, that fewer than a third will enroll in the exchange because of cost. And the children of these families will likely lose coverage simply because their parents think that the entire family has been cut.
- The significant proposed cuts to Medicaid provider rates will have a direct impact on provider networks and access to care. Many medical providers, PPSNE included, already struggle with reimbursement rates that do not cover the cost of delivering most services. Many providers will no doubt consider abandoning their participation in the program altogether.
- Additional programs being sacrificed, like the *Teen Pregnancy Prevention Programs* and the *Fatherhood Initiative* provide important and support for otherwise un-noticed at-risk populations of young people, including young dads.
- The elimination of thirteen full time DSS employees and closing offices exacerbates all of the issues clients and providers have accessing information, following up on claims and otherwise communicating with this vital state agency.

Surely, in one of our country's wealthiest states, there are both untapped resources and a moral pathway for doing better than this.